

DOCUMENTATION OF ENTERTAINMENT EXPENSES

Nature of the Event

Description of the Event (Lunch, Dinner, etc): _____

Date of Event: _____ Location of Event: _____

Purpose of Event: _____

Names of Attendees:

Name:	Title:	Personnel	
		SIU	Non-SIU
_____		<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>

Event Expenditures:

Total Estimate Cost of Event: \$ _____

Total Amount of Reimbursement Requested \$ _____
 (Attach all appropriate receipts)

Authorization and Approvals

I certify that the above reimbursement request amount is related exclusively to official University business and furthermore does not include any costs for alcoholic products (excluding Foundation accounts). If applicable, prior written approval has been obtained for reimbursement of entertainment expenses for spouses.

 Individual Requesting Reimbursement Date Fiscal Officer Date